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IN THE SECOND JUDICIAL DISTRICT COURT
DAVIS COUNTY, STATE OF UTAH, FARMINGTON DEPARTMENT

In the matter of the marriage of: **LAUREN R. MARSH**, and **KIRK RUSSEL MARSH.**	**FINANCIAL DECLARATION** Civil No.: **184701031** Judge: **Michael Edwards** Commissioner: **Christina Wilson**

You must fully and accurately disclose all assets and income in this document and provide attachments. If you fail to disclose all assets and income, you could be subject to sanctions under Utah Rule of Civil Procedure 37. Sanctions can include an award of non-disclosed assets to the other party, attorney's fees or other sanctions.

1. I am providing this form to the other party and (Choose one.):

[ ] I **am not filing the Financial Declaration with the court** because a hearing about child support, spousal support, property, debts, attorney fees and court costs is not scheduled, or because the court has not ordered me to file it.

I am filing the separate Certificate of Service of Financial Declaration.

[X] I **am filing the Financial Declaration with the court** because a hearing about child support, spousal support, property, debts, attorney fees and court costs is scheduled, or the court has ordered me to file it.

I am also filing the separate Certificate of Service of Financial Declaration.

2. I am attaching the following documents, if available:

Tax returns. For the last year before the petition was filed:	[ ] Attached [ ] Not attached [X] Doesn't apply

• federal and state income tax returns – personal and for any entities in which I have a majority or controlling interest • all documents used to prepare the tax returns	
Pay stubs or other proof of income. For the 3 months before the petition was filed (or 6 months of back statements for self employment): • pay stubs • other proof of all earned and un-earned income	[ ] Attached [ ] Not attached [X] Doesn't apply

[X] I marked some documents above as "not attached" because:

Document	Reason
Taxes	I have no personal income. My tax returns reflect my husband's income which is not relevant in this modification case.
Proof of Income	I have no personal income.

3. **Employment:** (You must attach proof of amounts listed. If the proof is not available, estimate the amount and explain how you reached that amount.)

[X] I am unemployed because:

I am a homemaker.

4. **Gross Monthly Income:** (You must attach proof of amounts listed. If the proof is not available, estimate the amount and explain how you reached that amount.)

[ ] I have the following monthly income before tax deductions:
(Print your pre-tax income in the boxes below. For income that changes from month to month, calculate the annual total and divide it by 12 months to list a monthly average.)

Source of income	Monthly amount
Work (Including self-employment, wages, salaries, commissions, bonuses, tips and overtime)	$
Rental income	$
Business income	$
Interest	$
Dividends	$
Retirement income (Including pensions, 401(k), IRA, etc.)	$
Worker's compensation	$
Private disability insurance	$
Social Security Disability Income (SSDI)	$

Source of income	Monthly amount
Supplemental Security Income (SSI)	$
Social Security (Other than SSDI or SSI)	$
Unemployment benefits	$
Education benefits (Including grants, loans, cash scholarships, etc.)	$
Veteran's benefits	$
Alimony	$
Child support	$
Payments from civil litigation	$
Victim restitution	$
Public assistance (Including AFDC, FEP, TANF, welfare, etc.)	$
Financial support from household members	$
Financial support from non-household members	$
Trust income	$
Annuity income	$
Other (Describe)	$
Other (Describe)	$
Total gross monthly income	**$ 0.00**

[X] I have no income because:

I am a homemaker.

5. **Monthly Tax Deductions: (**You must attach proof of amounts listed. If the proof is not available, estimate the amount and explain how you reached that amount.)

[ ] I have no monthly tax deductions because I have no income.

[X] I have the following monthly tax deductions.

Type of tax deduction	Amount
Federal income tax	$
State income tax	$
Municipal income tax	$
FICA	$
Medicare	$
Total monthly tax deductions	**$ 0.00**

6. **After Tax Income**

[ ] My monthly income is:

$ _____	Gross monthly income from section 4
- $ _____	Minus monthly tax deductions from section 5
= $ _____	Equals after-tax monthly income

[X] I have no income.

Warning

If you do not fully disclose all assets and income in this document and provide attachments you could be subject to sanctions under Utah Rule of Civil Procedure 37.

Sanctions can include an award of non-disclosed assets to the other party, attorney's fees or other sanctions.

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at **Provo Utah** (city, and state or country).

4/7/2025
Date

Signature ▶ Lauren Zimmer (signed with email permission)

Printed Name LAUREN ZIMMER